

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) **Joseph M. Bonaventure, Justice Court, Dept. 9, Las Vegas Township**
 Office (if applicable)
 Mailing Address (include city and zip code) **200 Lewis Avenue, Las Vegas, Nevada 89155**
 District (if applicable)
Bonaj@co.clark.nv.us Telephone No. **(702) 671-3330**
 E-Mail Address

Select Appropriate Box(es) ☐ CANDIDATE ☐ PAC ☐ BAG ☐ POL. PRY ☐ IND. EXP ☐ NONPROFIT CORP
☐ AMENDED ☒ ANNUAL FILING ☐ PETITIONERS WHO INITIATE/CIRCULATE PETITION & RECEIVE OR EXPEND FUNDS IN EXCESS OF 10K

- ☒ **Annual Filing - Due January 15, 2006**
 Period: January 1, 2005 - December 31, 2005
- ☐ **Report #1 - Due August 8, 2006***
 Period: Jan. 1, 2006 - Aug 3, 2006
- ☐ **Report #2 Due - October 31, 2006***
 Period: Aug. 4, 2006 - Oct. 26, 2006
- ☐ **Report #3 Due - January 15, 2007****
 Period: Oct. 27, 2006 - Dec. 31, 2006
- ☐ **Annual Filing - Due January 15, 2007**
 Period: January 1, 2006 - December 31, 2006

FOR OFFICE USE ONLY

- * These Reports are filed by incumbents/candidates running for office in the 2006 election cycle
 ** Third Report suffices for 2007 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100
 (See page 1 of instruction sheet)
2. Total Monetary Contributions Received of \$100 or Less
 (See page 2 of instruction sheet)
3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)
4. Total Monetary Contributions in the form of loans that were forgiven
 (See page 2 of instruction sheet)

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
-0-	-0-
-0-	-0-
-0-	-0-
-0-	-0-

5. Total Amount of Monetary Contributions Received
 (Add Lines 1 through 4) (See page 2 of instruction sheet)
6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))
 (See page 2 of instruction sheet)
7. Total Value of In Kind Contributions Received in Excess of \$100
 (See page 2 of instruction sheet)

This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
-0-	-0-
-0-	-0-

EXPENSES SUMMARY

8. Total Monetary Expenses Paid in Excess of \$100
 (See page 2 of instruction sheet)
9. Total Monetary Expenses Paid of \$100 or Less
 (See page 2 of instruction sheet)
10. Total Amount of All Monetary Expenses Paid
 (Add Lines 8 and 9) (See page 2 of instruction sheet)
11. Total Value of In Kind Expenses in Excess of \$100
 (See page 3 of instruction sheet)
12. Disposition of Unspent Contributions
 (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or incumbent does not run for reelection)
 (See page 3 of instruction sheet)

\$1,794.30	\$1,794.30
\$35.92	\$35.92
\$1,830.22	\$1,830.22
-0-	-0-
-0-	-0-

AFFIRMATION
 I Declare Under Penalty of Perjury That the Foregoing Is True and Correct.

Signature
 EL201.doc

Revised: Sep-05

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第 1 章

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 12

NAME AND ADDRESS
OF PERSON WHO
FORGAVE THE LOAN,
IF DIFFERENT THAN
CONTRIBUTOR

PAGE 2 OF 8

WRITTEN COMMITMENTSReport Period #

Name (print)

Office (if applicable)

District (if applicable)

Written: Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100
Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
None		

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CAMPAIGN EXPENSESReport Period #

Name (print) _____

Office (if applicable) _____

District (if applicable) _____

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

CAMPAIGN EXPENSES

Report Period #

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100**Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.385	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
United States Postal Service - stamps	A	01/03/05	\$111.00
Staff appreciation luncheon	J	01/06/05	\$250.00
United States Postal Service - stamps	A	01/24/05	\$33.30
Gifts for staff appreciation	H	04/26/05	\$240.00
Birthday gifts for staff members	H	08/30/05	\$260.00
Staff Christmas party	J	12/03/05	\$600.00
Justice Court Christmas party	H	12/05/05	\$300.00

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**IN KIND CAMPAIGN
CONTRIBUTIONS**

Report Period #

Joseph M. Bonaventure, Justice Court, Dept. 9, Las Vegas Township
Name (print) Office (if applicable) District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
None						

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**IN KIND
WRITTEN COMMITMENTS**

Report Period #

Joseph M. Bonaventure. Justice Court. Dept. 9. Las Vegas Township
Name (print) Office (if applicable) District (if applicable)

In Kind Written Commitments In Excess of \$100 or, When Added Together from One Entity Exceeds \$100
Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT
None		

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**IN KIND CAMPAIGN
EXPENSES**Report Period **#**

Joseph M. Bonaventure, Justice Court, Dept. 9, Las Vegas Township
Name (print) Office (if applicable) District (if applicable)

IN KIND**Expenses in Excess of \$100**

Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
None			

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Prescribed by Secretary of State
NRS 294A.120, 294A.125
294A.140, 294A.150, 294A.160
294A.200, 294A.210, 294A.220, 294A.362